

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/565,651

FILING DATE

01-04-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	1				
2		1 -				
3		1 -				
4		1 -				
5		1 -				
6		1 -				
7		1 -				
8		2				
9		2				
10		2				
11	1					
12		1 -				
13		1 -				
14		1 -				
15		1 -				
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17		1 -				
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TOTAL IND.	2	↓		↓		↓
TOTAL DEP.	22	←		←		←
TOTAL CLAIMS	24	████████		████████		████████

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			↓			↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS		████████		████████		████████